

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

ABUELITO CHEESE
27220056

- | | | | | |
|-----|----------------------------------------------------------------------------|---------------------------------------|---------------------------------------|-----------------------------------------|
| 1. | Month of <u>9/08</u> | | | |
| 2. | Is Outlet # (8 digit) Correct? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 3. | Is average Total flow-gal.day stated in space provided? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 4. | Is max. Total flow-gal day stated in space provided? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 5. | Is method used to calculate water stated? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 6. | Are number of working days stated? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 7. | Are there any parameters which have exceeded PVSC Local Limits? | <input type="checkbox"/> Y | <input checked="" type="checkbox"/> N | N/A |
| 8. | Is proper compliance/non-compliance statement provided? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 9. | Have correct number of samples been submitted? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 10. | Has PHC result been listed on MR-1 report? | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> N/A |
| 11. | Has sample number been reported in space provided? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 12. | Have all regulated parameters been listed on MR-1? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 13. | Has sample type been stated on MR-1? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 14. | Have all samples been taken during this reporting period? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 15. | Has NJDEPE certified lab been used? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 17. | Have results been written in space designated on MR-1? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 18. | Is correct method used to preserve samples stated on MR-1? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 19. | Has MR-1 been signed by authorized representative? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |
| 21. | Has information been submitted on proper MR-1 form? | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | N/A |

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

First Reviewer: comments on deficiencies _____

Date Reviewed 10/28 Date sent to user _____

Date due back _____ Reviewer MT _____

Second review comments on deficiencies _____

Date Reviewed _____ Date sent to user _____

Date due back _____ Reviewer _____

Date _____ Reviewer _____

PRETREATMENT MONITORING REPORTNAME: Abuelito Cheese OCT 21 2008MAILING ADDRESS: 607-609 Main Street Paterson N.J.FACILITY LOCATION: 607-609 Main Street Paterson N.J.CATEGORY & SUBPART: _____ OUTLET #: 1CONTACT OFFICIAL: Carol Paiz TELEPHONE: 973-345-3503NEW CUSTOMER ID / OUTLET ID: 27220056-1 OLD OUTLET DESIGNATION: _____

MONITORING PERIOD					
Start			End		
09	01	08	09	30	08
MO	DAY	YR	MO	DAY	YR

	Average	Maximum
Regulated Flow-gal/day		
Total Flow-gal/day	8833	9716

Method Used: Ending meter reading less beginning meter reading multiplied by 7.48 divided by 22 days27347 x 7.48x.95 divided by 22 Days

PARAMETER	9-11	MASS OR CONCENTRATION			# OF SAMPLES	SAMPLE TYPE COMP/GRAB
		MON AVG	MAXIMUM	UNITS		
Cd	Sample Measurement	<0.001		Mg/l	1	Comp
	Permit Requirement	0.19		Mg/l		
Cu	Sample Measurement	0.040		Mg/l	1	Comp
	Permit Requirement	3.02		Mg/l		
Pb	Sample Measurement	<0.002		Mg/l	1	Comp
	Permit Requirement	0.54		Mg/l		
Hg	Sample Measurement	<0.0005		Mg/l	1	Comp
	Permit Requirement	0.080		Mg/l		
Ni	Sample Measurement	0.00654		Mg/l	1	Comp
	Permit Requirement	5.9		Mg/l		
Zn	Sample Measurement	0.130		Mg/l	1	Comp
	Permit Requirement	1.67		Mg/l		
	Sample Measurement			Mg/l	1	Grab
	Permit Requirement			Mg/l		
	Sample Measurement			Mg/l	1	Grab
	Permit Requirement			Mg/l		
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					

Production Rate (if applicable)

PRETREATMENT MONITORING REPORT

Certification of Non-Use if applicable (use additional sheets):

OCT 21 2008

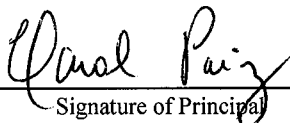
Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every

parameter used: El Abuelito is in compliance with the rules and regulations of PVSCExplain Method for preserving samples: Metals samples taken in glass containers and preserved with nitric acid to a ph of less than 2

No te: no changes made to the plot plan for this facility

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988



Signature of Principal

Executive or Authorized Agent

Carol Paiz

General Manager

Type Name and Title

10/17/08

Date

Abuelito Cheese Process Water Meter Reading

09/01/08 starting water meter reading 494535 cu/ft

09/30/08 ending meter reading 521882 cu/ft

521882

494535

27347 cu/ft

27347cu/ft x 7.48=204555 x.95=194327 total gallons for
the month of September

194327 divided by 22 days= 8833 gallons per day



ANALYTICAL DATA REPORT

for
Abuelito Cheese
607 Main Street
Paterson, NJ 07503

Project Name: PVSC MONITORING
Lab Case Number: E08-10507

MDL = METHOD DETECTION LIMIT

Metals

Lab ID: 10507-001

Client ID: 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 9/11/2008

Time Sampled: NA

Date Analyzed: 9/12/08

Parameter	Result	Q	MDL
Cadmium	ND		0.001
Copper	0.040		0.008
Lead	ND		0.002
Mercury	ND		0.0005
Nickel	0.00654		0.004
Zinc	0.130		0.008

General Analytical

Lab ID: 10507-001

Client ID: 01

Percent Moisture: 100

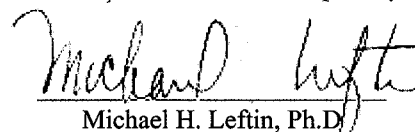
Date Sampled: 9/11/2008

Time Sampled: NA

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	19400	2.00	Aqueous-mg/L	9/12/2008 8:00
Total Suspended Solids	3360	83.3	Aqueous-mg/L	9/17/2008 13:00

ND = Analyzed for but Not Detected at the MDL

These data have been reviewed and accepted by:


 Michael H. Leftin, Ph.D.
 Laboratory Director

273 Franklin Road
 Randolph, NJ 07869
 Phone: 973 361 4252
 Fax: 973 989 5288



IAL is a NELAP New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program

